

DIVISION CIRCULAR #20C
(N/A)

DEPARTMENT OF HUMAN SERVICES
DIVISION OF DEVELOPMENTAL DISABILITIES

EFFECTIVE DATE: June 21, 2004

DATE ISSUED: June 21, 2004

- I. **TITLE:** Emergency Chemical Restraint
- II. **PURPOSE:** To establish a uniform system for the use of chemical restraints within the Division.
- III. **SCOPE:** This circular applies to developmental centers operated by the Division and Private Licensed Facilities for Persons with Developmental Disabilities licensed under N.J.A.C. 10:47.
- IV. **POLICIES:**

Chemical restraint is prohibited except for the administration of drugs ordered by a licensed physician on an emergency basis.

A Pro Re Nata (PRN) order for controlling acute, episodic behavior is prohibited.

A chemical restraint may be employed when an individual presents a danger to the individual or others in his or her immediate environment and alternative less restrictive intervention techniques have failed to limit or control the behavior.

A drug ordered by a N.J. licensed physician as part of an ongoing program of medication is not a chemical restraint in accordance with the requirements of Division Circular 21, "Psychotropic Medication".

A drug ordered by a licensed physician, physician's assistant, nurse practitioner, or dentist as a pretreatment prior to medical or dental

examination or prior to a procedure (e.g. mammography) is not a chemical restraint.

A drug self-administered by the individual is not a chemical restraint.

A chemical restraint may be used only in an emergency. Informed consent is not required in an emergency.

V. GENERAL STANDARDS:

- A. Definitions - The following terms shall have the meaning defined herein:

Chemical restraint means the administration of a drug in an emergency for the specific and exclusive purpose of controlling an acute or episodic behavior.

Emergency means a situation in which an individual engages in a behavior or patterns of behavior that will likely result in serious harm to self or others.

- B. Chemical restraints shall not be used as punishment, for the convenience of staff or as a substitute for services.

VI. PROCEDURE:

- A. If a person is exhibiting dangerous behavior, a chemical restraint may be requested only when other less restrictive intervention techniques have proven unsuccessful.
- B. A Registered Nurse shall contact the physician to give the information as to the need for a chemical restraint.
- C. If a physician is present at the facility at the time of the request, the physician shall examine the individual on site. If a physician is not present, a telephone order may be requested. It is preferable (but not mandatory) that the physician may discuss the patient's condition with a consultant psychiatrist (if the physician is not a psychiatrist) prior to giving the order.
- D. Instructions for monitoring the individual shall be part of the physician's order.
- E. A psychologist shall examine the individual within 24 hours after the administration of the chemical restraint.

- F. The Registered Nurse shall immediately document the use of chemical restraint. Documentation shall include the nature of the emergency, specific redirection; de-escalation techniques and the less intrusive interventions that were tried.
- G. The use of chemical restraints shall be reported by the Registered Nurse to the individual's Habilitation Plan Coordinator (HPC) or Interdisciplinary Team (IDT) Leader within three (3) business days. The HPC or IDT Leader shall hold a meeting with the IDT as needed.
- H. If a chemical restraint is administered three (3) times in a six-month (6) period, the IDT shall meet to address these behaviors. The IDT will determine if further interventions are indicated. These interventions may include, but are not limited to, a behavior program, psychiatric consultation or environmental changes. The IDT shall make appropriate referrals as necessary.
- I. Any use of chemical restraint that involves a major injury shall be reported as a Category "A" incident. All other use should be reported as a Category "B" incident.
- J. All use of chemical restraints shall be reviewed by the appropriate Human Rights Committee in accordance with Division Circular 5 and Quality Enhancement Procedure 6.
- K. The legal guardian shall be informed of all use of chemical restraints in accordance with Division Circular 20.

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Director